

Temporary Replacement of Main Supervisor for all HDR students

Notification of Supervision Arrangements for all HDR students during Absence of the Supervisor (6 weeks or more and up to 6 months)

Guidelines for temporary replacement of Main Supervisor

- A temporary main supervisor must be appointed where the main supervisor will be absent for a period of 6 weeks or more and up to 6 months.
- If the main supervisor is planning to be absent for more than 6 months, a permanent replacement for the main supervisor should be appointed. The main supervisor may remain as an associate supervisor and supervision arrangements can be reviewed when the main supervisor returns. Please complete the form for permanent replacement of supervisor.
- The associate supervisor may act as the temporary main supervisor when:
 - the associate supervisor is accredited and has sufficient time to provide full supervision
 - the main supervisor is absent for a period of up to 6 months
 - the main supervisor will continue to maintain regular email contact with the student
- If the associate supervisor is inexperienced, an alternative temporary main supervisor must be appointed.
- The Student must agree to a regular meeting schedule with the temporary main supervisor, at least once per fortnight for full-time students and once per month for part-time students.
- The temporary main supervisor must assume responsibility for sign off on all matters relating to the student's candidature, for example annual progress reports, variations to candidature/scholarship, submission of thesis.
- Applications should be submitted to the Monash Research Graduate School 4 to 6 weeks before the planned absence.

Section 1: To be completed by the student

ID No: Department:

Degree:

Family Name: Title:

Given Names:

Mailing Address:

Telephone No: Home: Work:

Email address:

Please provide details of where you are up to with your research project and thesis writing and document any concerns you have with regard to the proposed supervision arrangements while your main supervisor is away:

I have been advised of the temporary changes to my supervision arrangements and I am satisfied with the arrangement. I agree to meet on a regular basis with the temporary main supervisor.

Candidate's signature: _____ Date: _____

The information on this form is collected for the primary purpose of assessing your application for withdrawal. Other purposes for collection include attending to administrative matters, corresponding with you and statistical analysis. If you choose not to complete all questions on this form it will not be possible for Monash University to assess your application. You have a right to access personal information that Monash University holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact the University Privacy Officer on 9905 6011.

Section 2: To be completed by the current supervisor

Name:

I will be absent for the period from: to:

(i) I will maintain contact with the student by:

Fax E-mail/telephone Review of written drafts Other : _____

(ii) The following academic staff member has agreed to act as the temporary main supervisor:

Name: Staff ID: Department:

The temporary main supervisor will be available for the full period of my absence yes No



Please specify any periods of absence:

Is the nominated supervisor temporary replacement supervisor accredited with MRGS to supervise the abovementioned student?

Yes No



Please nominate an alternative supervisor

Associate or Joint Supervisor/s

Listed below is/are the name(s) of the associate supervisor(s) of this student:

1. Name: Staff ID: Department:

2. Name: Staff ID: Department:

Supervisor's name (Please print): _____

Supervisor's signature: _____ Date: _____

Temporary Supervisor's name (Please print): _____

Temporary Supervisor's signature: _____ Date: _____

Section 3: Endorsement by head of academic unit or nominee

Name of Head (Please print): _____

Signature of Head: _____ Date: _____

This completed form should be submitted to:

Research Degrees Office,
Education Faculty,
G06, Building 6, Wellington Rd, Clayton
Monash University, VIC 3800, Australia

Telephone + 61 3 9905 2821 Facsimile + 61 3 9905 5400

Email michael.enticott@education.monash.edu.au

<http://www.education.monash.edu.au/research/degrees/>